



Autism Toolkit for Secondary Provision

**SOLIHULL SPECIALIST INCLUSION SUPPORT
SERVICE**



Services and support for children and young people aged 0-25 with special educational needs or disabilities.



Birmingham and Solihull
Clinical Commissioning Group



Autism: the positives



Understanding, embracing and celebrating different ways of thinking and doing can release the true power of the autistic mind. Here we look at the positive features of autism.



Attention to detail

- Thoroughness
- Accuracy



Methodical approach

- Analytical
- Spotting patterns, repetition



Deep focus

- Concentration
- Freedom from distraction



Novel approaches

- Unique thought processes
- Innovative solutions



Observational skills

- Listen, look, learn approach
- Fact finding



Creativity

- Distinctive imagination
- Expression of ideas



Absorb and retain facts

- Excellent long term memory
- Superior recall



Tenacity and resilience

- Determination
- Challenge opinions



Visual skills

- Visual learning and recall
- Detail-focussed



Accepting of difference

- Less likely to judge others
- May question norms



Expertise

- In-depth knowledge
- High level of skills



Integrity

- Honesty, loyalty
- Commitment

Remember

Every experience of autism is **unique**. No one person will identify with every positive feature of autism. We all have **individual** skills, attributes and characteristics that are as unique as our personalities – this is the **power of neurodiversity**.

Welcome to the SISS Autism Team Toolkit for Secondary Schools,

This toolkit has been produced by our team to support Secondary schools to further develop their understanding of Good Autism Practice and the implementation of strategies for pupils with Autism.

These strategies are offered as a starting point and show a good Universal provision that we would hope to see in all classrooms and settings.

We have also included some Targeted support strategies, where pupils may need further support.

There are numerous further strategies that schools can use, we have included links to further reading and support where we can.

Please also remember to refer to your AET Tools for Teachers resources, the Solihull Local Offer and our Twitter feed:

Solihull Local Offer: <https://socialsolihull.org.uk/localoffer/>

SISS Autism team on the Local Offer:

<https://socialsolihull.org.uk/localoffer/education/children-and-young-peoples-send-service/siss-2/the-autism-team/>

SISS twitter feed: https://twitter.com/SISS_Solihull

For further information, please contact your Specialist Teacher.

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The Graduated Approach

As required by the SEND Code of Practice 2014, we should be following a Graduated Approach to support for all pupils who need it. We should see this happening as a matter of course, alongside Quality First Teaching, in all classrooms.

The '*graduated approach*' outlines four types of action that need to be taken for effective support for pupils with SEN to be in place.

They form a cycle where earlier decisions and actions are revisited and revised with the growing understanding of a pupil's needs and the support that this needed to ensure good progress.

The four stages of the cycle are:

- **Assess**
- **Plan**
- **Do**
- **Review**

'The graduated approach starts at whole-school level. Teachers are continually assessing, planning, implementing and reviewing their approach to teaching all children.'

Nasen. 2014.



You can use the information in this toolkit to help you review and revise your support and interventions for the children you are working with.

Remember to keep a record of what you have done and what you are going to do next, based on your review of the current provision.

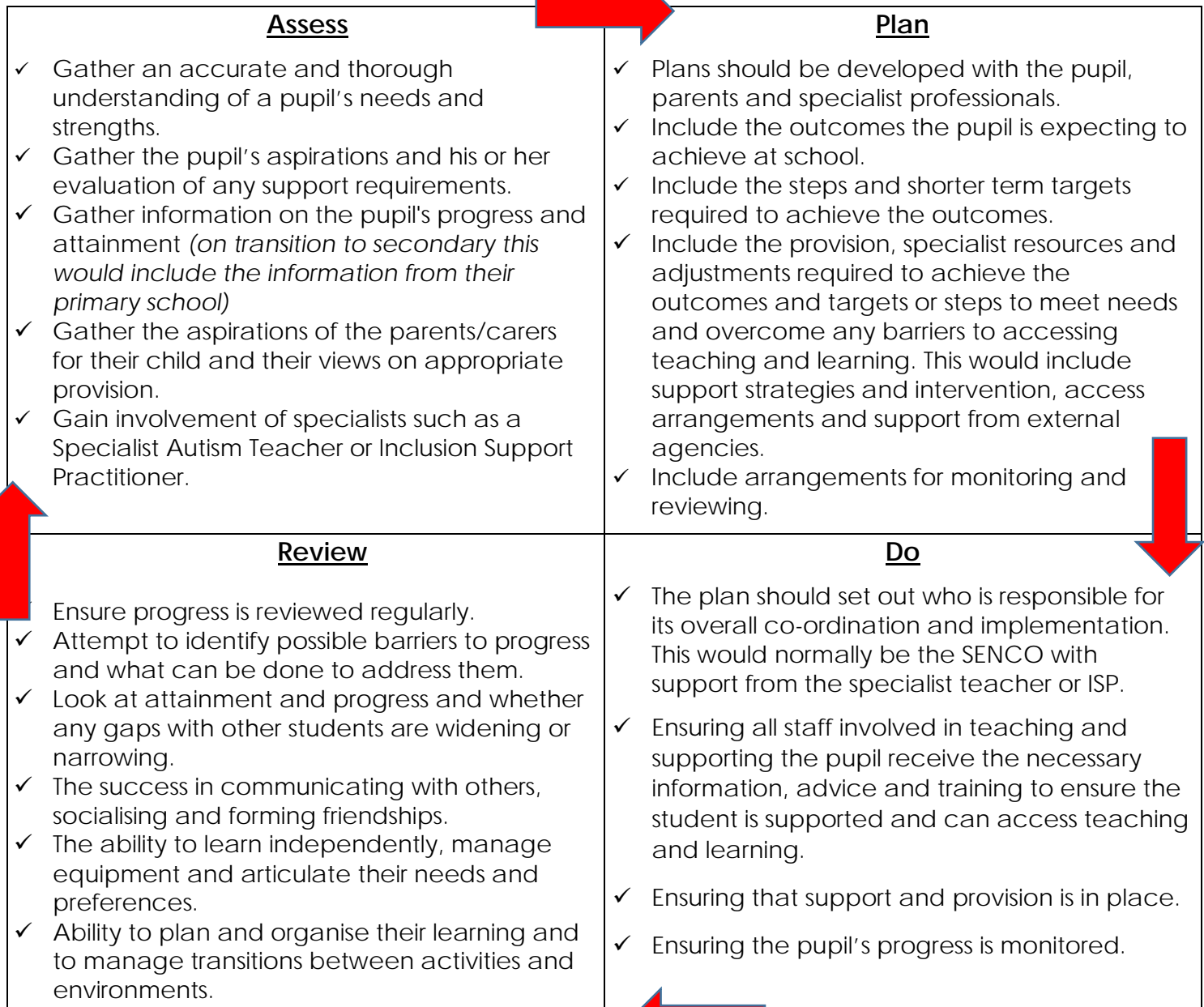
Assess - Plan - Do - Review



The SEND Code of Practice requires settings to apply a graduated response to meeting the needs of learners based on the assess-plan-do review cycle.

Where a pupil is identified as having SEN, schools should take action to remove barriers to learning and put effective special educational provision in place. This SEN support should take the form of a four-part cycle through which earlier decisions and actions are revisited, refined and revised with a growing understanding of the pupil's needs and of what supports the pupil in making good progress and securing good outcomes. This is known as the graduated approach. It draws on more detailed approaches, more frequent review and more specialist expertise in successive cycles in order to match interventions to the SEN of children and young people.

para 6.44, DfE SEND Code of Practice¹



People with a diagnosis of Autism often have their own 'spiky profile' of strengths, needs and differences. This means that one approach or provision will not meet the needs of all children with Autism. We need to consider the *four areas of difference* when completing an 'Assess, Plan, Do, and Review' process when supporting these individuals.

Communication

Social Understanding

Processing Information

Sensory Processing

The range of abilities within each of these areas will vary from individual to individual, so each pupil will require a differentiated approach. Observing and identifying your pupils individual level of need is key before planning Universal, Targeted or Higher Needs provision.

Universal Provision Strategies

Provision	Page	Tick
Regular SENCO updates with parents following Assess, Plan, Do, Review process – ensure notes/minutes are taken	5	
Quality first teaching	7	
Weekly lessons and Homework Timetables	9	
'First and Then' task board	11	
Lesson Task board	12	
Reminder/don't forget lists	13	
SISS Autism Team Observation Checklist	14	
Support pupils to create a 'Me Mind map' to aid staff when writing the pupils Need's Based Plan.	17	
Needs Based Plan - Ensure all staff are aware of pupils with Autism and that they have access to their pupil profile or needs based plan	18	
Autism Education Trust's ideas to meet standards	21	
Ensure pupils know where to go and who to speak to within school when they are feeling distressed, anxious or angry	22	
Ensure all staff have had up to date training at the required level through Autism Education Trust – use the AET 'staff confidence questionnaire' to regularly assess the training needs of staff	23	
Top Tips for ensuring Universal Provision, including Transition, Social Skills, Structure/Routine and Learning Aids.	24	

Quality First Teaching Tips for Children with Autism

- ✓ Keep language simple, short and unambiguous.
- ✓ Give one instruction at a time. (build this up as and when the child can manage more than one)
- ✓ Allow extra time for processing verbal information (National Autistic Society and AET recommend 10 seconds minimum)
- ✓ Gain the child's attention first, usually by using their name. It is unlikely that the child will realise that when you are talking to 'everyone' that this also includes them.
- ✓ Give definite instructions, not vague choices – use 'you need to' rather than 'would you like to'.
- ✓ Try to keep your tone neutral, do not shout.
- ✓ Use visual communication methods as much as possible: visual timetables, objects of reference, modelling, demonstration, Social Stories, social scripts, Now/Next, task boards.
- ✓ Make sure the child knows what they are aiming for – show them a completed example, give them a clear structure for the work, how long? How many? How will I know I have finished?
- ✓ Avoid negatives – teach the child what to do rather than what not to do e.g. 'walk in the corridor' rather than 'don't run', as the child needs to know clearly what they must do.
- ✓ Check for understanding regularly, ask the child to tell you what they are going to do.
- ✓ Slow the pace down, repeat instructions individually to the pupil if necessary.
- ✓ Avoid the use of sarcasm, metaphors, and idioms – but if you do – be prepared to explain them!
- ✓ Remember that facial expressions and gestures used in regulating behaviour in classes – 'the look', raised eyebrows, waiting for quiet, the 'clap it back to me' – will not be picked up by children with Autism and so will not work – give a specific instruction.
- ✓ Do not expect eye contact and do not force it.

- ✓ Prepare for change, be as predictable as possible (visual timetable etc.)
- ✓ Offer consistent daily routines, plan in changes ahead of time.
- ✓ Ensure maximum consistency of approach from ALL staff working with the child (including sports coaches, peripatetic teachers, volunteers, lunchtime staff)
- ✓ See all behaviour as a way of communicating – deterioration in behaviour often tells us of an increase in anxiety / sensory overload. (although the child may not be aware of this)
- ✓ Reduce distractions and sensory overload where possible. Have a calm, plain area of the classroom where the child can have some time out / work station.
- ✓ Use of a seating plan can be an excellent tool to ensure reduced anxiety (they know where they will sit) and the teacher can control who sits near them and therefore reduce distraction.
- ✓ Pre-teach new topic vocabulary.
- ✓ Keep the classroom clutter free and label all equipment to allow for independence.
- ✓ Do not do for pupils what they can do for themselves ... allow them the extra time to do so.



Source: <https://thirdspacelearning.com/blog/quality-first-teaching/>

Your Weekly Timetable

Name: _____

Time / period	Monday	Tuesday	Wednesday	Thursday	Friday

- ✓ You can highlight your least and most favourite times of the school week using different colours.
- ✓ Don't forget to add in break and lunch times!
- ✓ Remember to keep this with you at all times, you can check where you should be and plan for the week ahead.

Subject	Monday	Tuesday	Wednesday	Thursday	Friday

Your Homework Timetable



Name: _____

Don't forget to write down when your homework is due. 😊

I'd like you to complete the instructions below **before** you move on or put your hand up for further directions.

can cross off

each step as you go to show all the **brilliant** work you have completed

1	2
	



already. 😊

Name: _____

Date: _____

Tasks for This Lesson

1	<i>e.g. Write the date on a new page in your book and underline it</i>	✓
2	<i>e.g. Write the title and underline it</i>	
3		
4		
5		
6		
7		
8		
9		
10		

Fantastic, well done! You have completed all of your tasks for today's lesson. 😊

'Don't Forget' List

You can use this table to list down some items or jobs you need to remember for the day or week ahead.



For example, you can list things that you need to bring to school tomorrow like your P.E Kit, homework or cookery ingredients. You could also list items such as your coat and pencil-case so you don't go home without them.

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Image source: <https://www.dictionary.com/e/emoji/thinking-face-emoji/>

SISS Autism Team: School Observation Checklist

This observation checklist has been designed with the four areas of difference in mind and using the AET Progression Framework. The titles and numbers relate to sections of the Framework. Please use this to complete observations of children over time, and use your findings to guide target setting for individuals and to monitor progress.

Social Communication	Yes	No	Dev
Communication and interaction			
Communication information/commenting on events			
3.1 Answers a question			
3.2 Communicates information about the past and future			
3.3 Expresses opinions/thoughts/feelings			
3.4 Gives instructions/explanations			
3.5 Gives recounts and explanations			
3.6 Comments/draws attention to item/event			
Listening and understanding			
4.1 Responds to sounds			
4.2 Understands single spoken word			
4.3 Understands simple statement			
4.4 Understands instructions			
4.5 Understands questions			
4.6 Extracts relevant meaning/information			
4.7 Understands humour and figurative speech			
4.8 Understands informal speech/slang			
Non-verbal communication			
7.1 Adapts communication/behaviour to suit situation			
7.2 Shows evidence of 'active listening'			
7.3 Understands non-verbal communication			
Social Interaction			
Communication and interaction			
Engaging in interaction			
1.1 Responds positively to familiar adult			
1.2 Seeks attention from familiar adult			
1.3 Shares attention focus with adult			
1.4 Engages in interactive exchange with adult			
Making requests			
2.1 Makes request for an item			
2.2 Refuses an item/activity			
2.3 Makes requests for interaction to continue/stop			

2.4 Requests help			
2.5 Requests information/asks a question			
Greetings			
5.1 Responds to greetings/being addressed			
5.2 Greets others			
Conversations			
6.1 Gains another's attention			
6.2 Takes lead in conversation			
6.3 Responds to conversation partner			
6.4 Maintains flow of conversation			
Social understanding and relationships			
Being with others			
1.1 Accepts the presence of others in familiar environment			
1.2 Engages in shared activity			
1.3 Copes with proximity of others in public space			
Interactive play			
2.1 Accepts presence of adult in play environment			
2.2 Engages in interactive play with an adult			
2.3 Engages in object play with adult			
2.4 Engages in play with peers			
Positive relationships (supporting adults)			
3.1 Engages positively with supporting adult			
3.2 Accepts help from an adult			
3.3 Accesses activities/situations with adult support			
3.4 Seeks advice and support from adult			
Positive relationships and friendships (peers)			
4.1 Initiates interaction with peer/s			
4.2 Engages positively in interaction with peer/s			
4.3 Takes account of others interests/needs/feelings within interactions			
4.4 Takes action to sustain positive relationship			
4.5 recognises negative or bullying behaviour towards self or others			
Group activities			
5.1 attends to focus of group			
5.2 Participates in group activity			
5.3 Is aware of self as part of group			
5.4 Understands and conforms to expectations of working in a group			
5.5 Participates in group discussion			

Sensory processing			
Understanding and expressing own sensory needs			
1.1 Expresses sensory likes/dislikes			
1.2 Understands own sensory needs			
Responding to sensory interventions			
2.1 Responds to sensory adaptations to the environment			
2.2 Responds to sensory input from supporting adult			
2.3 Responds to input using sensory 'equipment'			
2.4 Responds to regular sensory programmes			
Increasing tolerance of sensory input			
3.1 Shows increased tolerance of sensory input			
Managing own sensory needs			
4.1 Accepts support to manage own behaviour in relation to sensory needs			
4.2 Requests others' help to manage own sensory needs			
4.3 Takes action to manage own sensory needs			
4.4 Reflects on sensory needs and behaviour			
Information processing			
Interests routines and processing			
Coping with change			
1.1 Accepts change within familiar situations			
1.2 Takes action to cope with change			
Transitions			
2.1 Makes successful transition in everyday situations			
2.2 Engages with preparation for transition to new setting			
Special interests			
3.1 Uses special interests to engage positively in activities/exchanges			
3.2 Engages with a range of activities unrelated to special interests			
Problem solving and thinking skills			
4.1 Makes a choice			
4.2 Uses information available to make an appropriate choice			
4.3 Sorts items into categories			
4.4 Uses information to plan and predict			
4.5 Makes deductions based on information available			
4.6 Recognises and takes action to solve problems			
4.7 Reflects on problems encountered and strategies used			

In each of the boxes, put a fact about yourself. It could be favourite things, stuff you like to do or even things you really don't like.

You can put pictures, drawings, one word or a sentence.

This is about you, so there is no



Name:



Needs Based Plan – Autism Focus

4 key areas of difference

Social Communication:

Interaction with others:

Name:

Year/Form:

Key Staff Member:

Other key Information:

Interests and Information Processing:

Sensory Processing:

Individual Strategies

The Individual Pupil:

Building Relationships:

Curriculum and Learning:

Enabling Environments:

The AET Progression Framework.

The Progression Framework is a comprehensive interactive assessment tool for children and young people on the autism spectrum **in mainstream and specialist early years, school and post 16 settings.**

It is designed to support staff in **identifying learning priorities and measuring progress** in areas that fall outside the national curriculum.

Find it here  <https://www.autismeducationtrust.org.uk/shop/pf-shop/>

Ideas to support the AET Standards:

The Individual Pupil	Enabling Environments
<ul style="list-style-type: none"> ✓ Needs Based Plan / 1 page profile / pupil passport ✓ Individual card info to share with others or staff as needed ✓ Direct work around perception, bullying ✓ Person Centred Reviews ✓ Curriculum that develops understanding of emotions ✓ Educating the whole school about Autism ✓ Explore ALL diagnoses and possible issues e.g. anxiety and ensure these are included on Needs Based Plan ✓ Share in staff meetings / briefing ✓ Obtain pupil voice ✓ Identify triggers and strategies to support ✓ Observations over time in different settings ✓ ABC / STAR charts ✓ Assemblies around difference ✓ Lead for Autism / champion in school ✓ Visuals in class used consistently 	<ul style="list-style-type: none"> ✓ Task board ✓ Visual timetable ✓ Individual timetable ✓ Sensory diet written in ✓ Break out / safe space ✓ Sensory audit and with actions carried out ✓ Share info regularly – weekly staff meeting, briefing, SEND bulletin

Building Relationships	Curriculum and Learning
<ul style="list-style-type: none"> ✓ Sharing good practice – staff meetings, Leads for Autism meetings, SENCo networks ✓ Coffee mornings – invite SENDIAS etc. ✓ Planned meetings with parents to keep up to date. ✓ Named contact for parents to speak to – Lead for Autism? ✓ Staff having time to meet with / contact parents ✓ Positive phone calls / texts home ✓ Make all involved of local offer and services – signposting externally ✓ Whole school approach ✓ AET training – for all as appropriate ✓ Having a lead for autism to co-ordinate ✓ Team Around the Child meetings, regular and minuted ✓ Modelling to staff, good autism practice. ✓ Social skills groups, regular, and different people / places / times ✓ Inclusive practice in school ✓ Buddying system ✓ ‘Bonding sessions’ with the child – get to know them and their special interests to help with engaging them. ✓ Transition meetings between staff ✓ New staff ‘engineer’ situations where they can meet the pupil ✓ Group work within class where pupils have specific roles ✓ Group contract agreed and displayed 	<ul style="list-style-type: none"> ✓ Reducing language ✓ Allowing plenty of processing time ✓ Ensure visual prompts, guide in place in all areas of school and learning ✓ Identify targets using Progression Framework ✓ Child has ownership of targets and learning ✓ Task boards ✓ Exam access arrangements – in place as normal way of working way before exams ✓ Sensory audit and actions following this ✓ SLT give time for observations, time to discuss with colleagues and the child ✓ ISPs to visit and model good practice / praise good practice ✓ Give the child work they can do – experience success, positive experience ✓ Quality first teaching across all areas of school ✓ Basing tasks on special interests ✓ Assess Plan Do Review ✓ Pre teaching of topics, vocab etc. ✓ Time for reflection ✓ Tasks visually displayed on whiteboard ✓ Getting child or peers to repeat task back to adult ✓ Show ‘WAGOLL’ what a good one looks like, also what a finished one looks like ✓ Ipad / typing

- ✓ It's best to show the child how to use this when they are calm, possibly in a 1:1 session.
- ✓ Work through this together and talk through possible different scenarios which this resource would be used in school.
- ✓ Encourage the child to refer to this resource when they need to regulate their emotions or when they are feeling overwhelmed in school.

What should I do if I feel upset, anxious or angry in class?

Stop, slowly take 3 deep breaths and count to 10

1 2 3 4 5 6 7 8 9 10

Do I feel any better?

Yes

No

Stay in my lesson and carry on completing my tasks.

Who is my Key Adult in school? Do I need to go and speak to them now or can I wait for break time?

Where is my Safe Place in school? Should I go there now and take a brain break for 5 minutes?

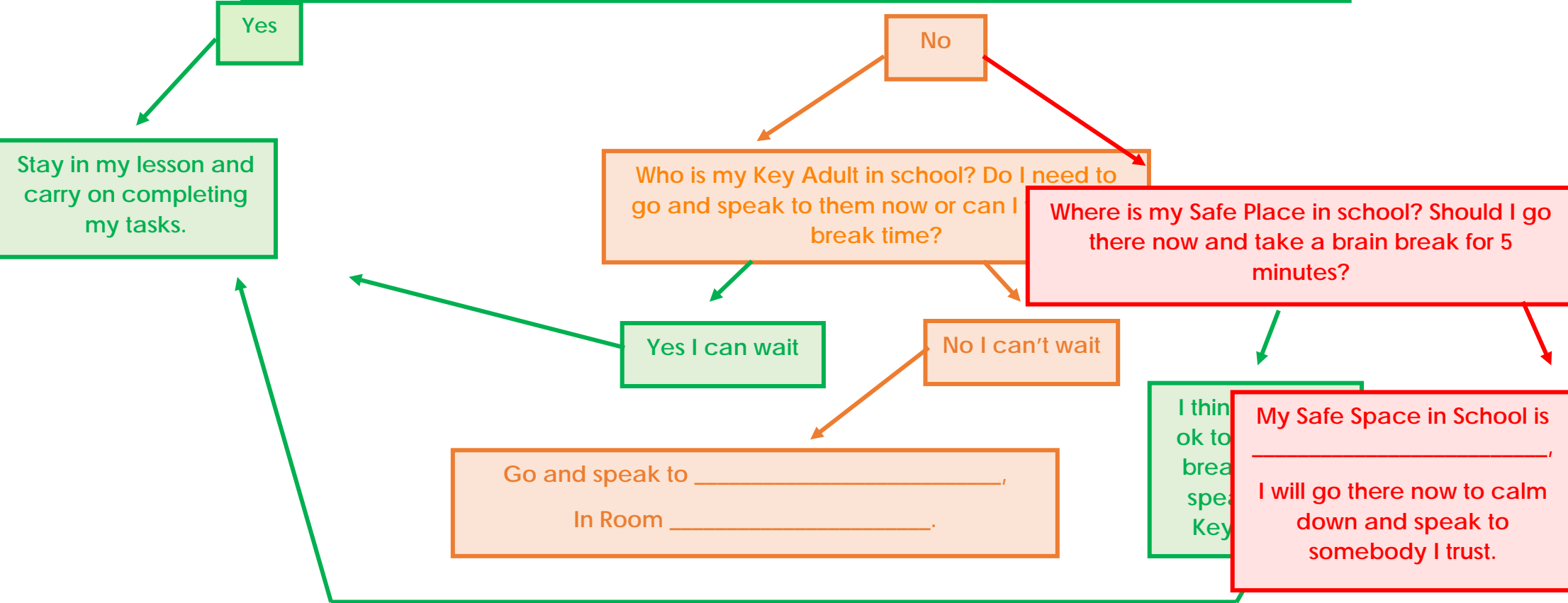
Yes I can wait

No I can't wait

Go and speak to _____,
 In Room _____.

I think it's ok to take a brain break and speak to my Key Adult.

My Safe Space in School is _____,
 I will go there now to calm down and speak to somebody I trust.



Staff Self Evaluation Exercise - Autism Education Trust

On a scale of 1 to 4, with 4 being the most confident and 1 being the least, tick how confident you are about the following statements on Autism.	1	2	3	4
I can explain what Autism is to my colleagues				
I understand what the key areas of difference are and how they affect an individual				
I recognise that Autism affects children in different ways				
I am aware of how sensory processing difficulties can affect a child				
I know what to do if I have concerns that a child has Autism				
I understand that children with Autism can have an uneven profile of development				
I understand the need to develop particularly good relationships with parents of children with Autism				
I know how best to support parents of children with Autism				
I recognise that communication is important inside and outside the setting/service/provision				
I understand how a child with Autism may have differences in their social and emotional understanding of themselves and others				
I know how to support and encourage children with Autism to interact with other children				
I am confident in organising a physical environment that is enabling for a child with Autism				

Top Tips to Support Universal Provision

Structure and Routine:

- ✓ Pupils need to have a timetable to refer to, these can be colour coded, daily/weekly, Pocket size and laminated
- ✓ Visuals through an Interactive White Board are a useful tool to add structure to a lesson, such as; Countdown Timer, Noise Level Indicator, RED = too noisy ORANGE = working noise GREEN = silent
- ✓ Keep to a routine in class and if there has to be changes please let the pupils know about it in advance.
- ✓ Understand unexpected changes may cause anxiety which can result in either challenging behaviour or withdrawal.
- ✓ Stick to the same seating plan and give advanced warning of changes and group work.



Transition:

- ✓ Sometimes a small change can cause more disruption than big changes, be aware of this and increase support if necessary by checking in with the pupil. At school any of the following can cause an emotional reaction; timetable changes, substitute teacher, new class rules, losing an item of stationary, sitting in a different place or having a friend absent from school.
- ✓ Transitions between classes, particularly in secondary school, can be problematic and unsettling. The student may become distressed when moving through noisy, crowded hallways. Be mindful of this, allow pupils to leave class early to miss the rush.
- ✓ Situations such as Fire drills or celebration assemblies could potentially upset pupils with Autism, they may want to hide or run away and be uncooperative rather than participate. A social story could be used to go over situation like this.

Learning Aids:

- ✓ Multi-Tasking may be a barrier as individual learning styles can differ and therefore some pupils with Autism may have difficulties listening and writing at the same time. Perhaps allow them to watch or listen first then make notes.
- ✓ Some children with Autism may need an explicit explanation as to why they need to write neatly or show workings out in maths for example, they may need more support to write or present information appropriately, this can be done by modelling expectations.
- ✓ Children with Autism may perceive redrafting work is just repeating work already completed. The child may need to know the reasons for needing to redraft and improve.

- ✓ If there is too much text or verbal input within a lesson, a child with Autism may struggle to follow it. List important points to look out for on the board so the child can refer back to them.
- ✓ Make lessons as visual as possible, bullet point tasks so they are clear. A small whiteboard near a child with Autism may be useful. Try to plan work with a clear start and finish.

Social Skills:

- ✓ If a child says something that is socially inappropriate explain why, rather than tell them off.
- ✓ It may be useful to explain what other people may be thinking and feeling in situations as they might not have picked up on it, for example if another pupil is upset with them.
- ✓ If friendships cause challenges, teaching social rules and giving them social scripts so they know what they should do and say may be beneficial.
- ✓ A child with Autism may need discrete support within the social aspects of a lesson, not necessarily the actual academic content. The bigger the group, the more likely the child is to struggle to communicate effectively so they might need specific support to help to assign roles within the group, accept other people's opinions, resolve conflict and modelling appropriate behaviour if there is a competitive nature to the task.
- ✓ Sometimes a person with ASD will be keen to engage in conversation, but only know how to talk about an obsession or keen interest. People with Autism may sometimes lack the pragmatic language skills to just have 'a chat'.
- ✓ Talking about a keen interest can be a positive method to calm or distract a child with Autism.
- ✓ Use the pupil's name and wait until they give you their attention (some pupils may not be able to look directly at you).
- ✓ Pupils may not recognise instructions given to the whole class. Give individual instructions.
- ✓ If you are pointing at the board or at a resource, make sure the pupil is looking at the right item – highlighting can help with this.
- ✓ Allow time for the child to process verbal information – this can vary but may take up to 20 seconds.

Targeted Provision Strategies

Provision	Page	Tick
Red card/brain break/time out card – Five minute early pass	27	
Use of ABC/ STAR charts to record behaviour and identify patterns and triggers – all staff working with the child should have access to these	28	
Use a range of emotion scales/charts to support the pupil identify their feelings	30	
Reasonable adjustments to uniform		
Provide a soft start to the day & Preferential seating or seating in a low arousal workspace	34	
Sensory Assessment Checklist	35	
Regular meet and greet and check ins with a key adult		
More frequent use of social scripts to teach some social skills		
Differentiated work containing the interests of the child to motivate them		
Additional adult support in subjects where the child is struggling to make progress		
Additional resources to support learning – e.g. a laptop if struggling to write		
Appropriate adjustments to meet the child's sensory needs – e.g. fiddle objects		
Facilitate a buddy support system		
Quantity of work expectations reduced or increased time allowances in lessons		
Access to quiet space or clubs during break and lunch time		
Reduction of the amount of homework expected		
Regular group or individual intervention sessions focusing on the needs of the child. This may include work on anger, sensory needs, social skills, comic strip conversations/social scripts or anxiety		
Use the Coventry Grid to help identify whether autism strategies are appropriate to support a behaviour or whether SEMH support is needed to address attachment difficulties	38	
More frequent observations in class and in social environments		
More frequent SENCO updates with parents following the Assess, Plan, Do, Review process		
Students in KS3/4 may need access arrangement when sitting exams, this could include a scribe or extra time etc. Use the student's view 'normal way of working checklist' to plan and prepare for this.	56	
Students in KS3/4 may need access arrangement when sitting exams, this could include a scribe or extra time etc. Use the Teacher's view 'normal way of working checklist' to plan and prepare for this.	59	
Recommendations of further resources for targeted provision in school.	62	

I NEED A e!

I really need to stop working for a few minutes and take a break. Once my body and brain calm down, I can re-join the group and get back to work.

✓ During my break I can go to _____

✓ I can do the following things to help me;

X I need to avoid; _____

Pupil Name: _____ Signed by: _____

Five Minute Early Pass!

I am allowed to leave lessons five minutes earlier than the rest of my class to avoid loud and busy hallways and to avoid queues at lunch and break time.

- ✓ I must keep my pass with me at all times.
- ✓ I must use my pass responsibly.
- ✓ I must not share my pass with my friends.

Pupil Name: _____

Pupil Year/Form: _____

Form Tutor/ Key person: _____

Signed by: _____

This ABC chart can be used to record behavioural concerns.

- ❖ 'A' stands for **antecedents**, that is, what happens immediately before the behavioural outburst and can include any triggers, signs of distress or environmental information.
- ❖ 'B' refers to the **behaviour** itself and is a description of what actually happened during the outburst or what the behaviour 'looked' like.
- ❖ 'C' refers to the **consequences** of the behaviour, or what happened immediately after the behaviour and can include information about other people's responses to the behaviour and the eventual outcome for the person.

It can also be a good idea to keep track of where and when the behaviour occurred to help in identifying any patterns.






Day, date and time	Antecedent	Behaviour	Consequence	Additional notes

STAR Recording Chart

Name of pupil _____ Date: _____ Staff present: _____

Time / Date	Setting – describe the physical and social setting, as well as the situation – what was happening?	Trigger – a factual account of what happened immediately before the incident.	Action – what did the child do? Describe actual, observable behaviours	Result – what happened as a consequence? What did staff do? What was the result for the child?

Signed by: _____

				
1	2	3	4	5
I am happy and everything is going well.	I am just about ok	I am beginning to feel unhappy	I am really worried now	My worries have really taken over and they are HUGE

My Scaling Chart

- ❖ Now I have identified how I am feeling on this scaling chart, what do I need to do next?
- ❖ Am I fine to carry on with my day?

❖ Do I need some support, if so who will I go to and where is a safe space in school?

Emotional Check-In

Name:

Date:

Today, I am feeling:



Calm



Happy



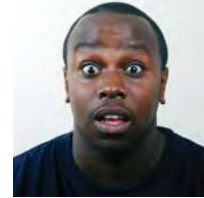
Excited



Confused



Nervous



Afraid



Disappointed



Hurt



Sad



Bored



Upset



Angry

Emotional Check-Out

Name:

Date:

Now, I am feeling:



Calm



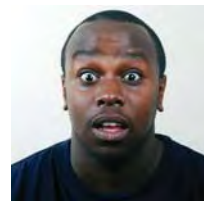
Happy



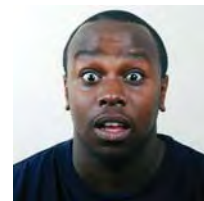
Excited



Confused



Nervous



Afraid



Disappointed



Hurt



Sad



Bored



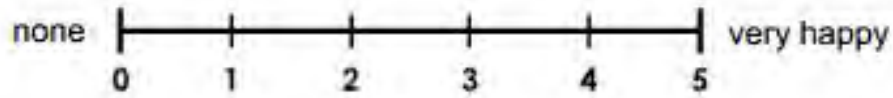
Upset



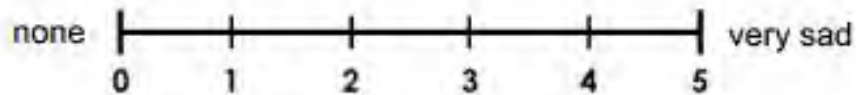
Angry

Basic Emotion Assessment

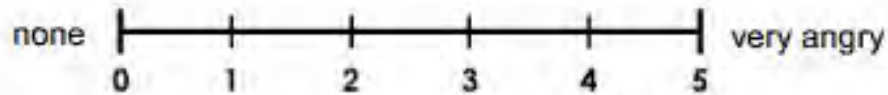
Happiness



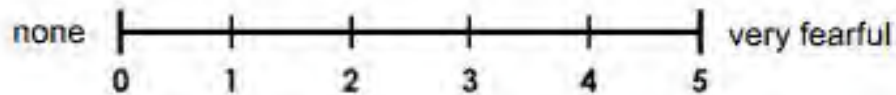
Sadness



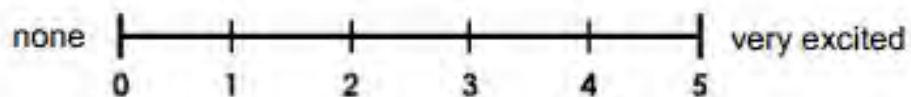
Anger



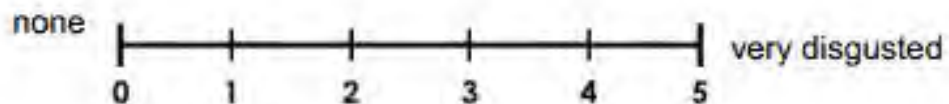
Fear



Excitement



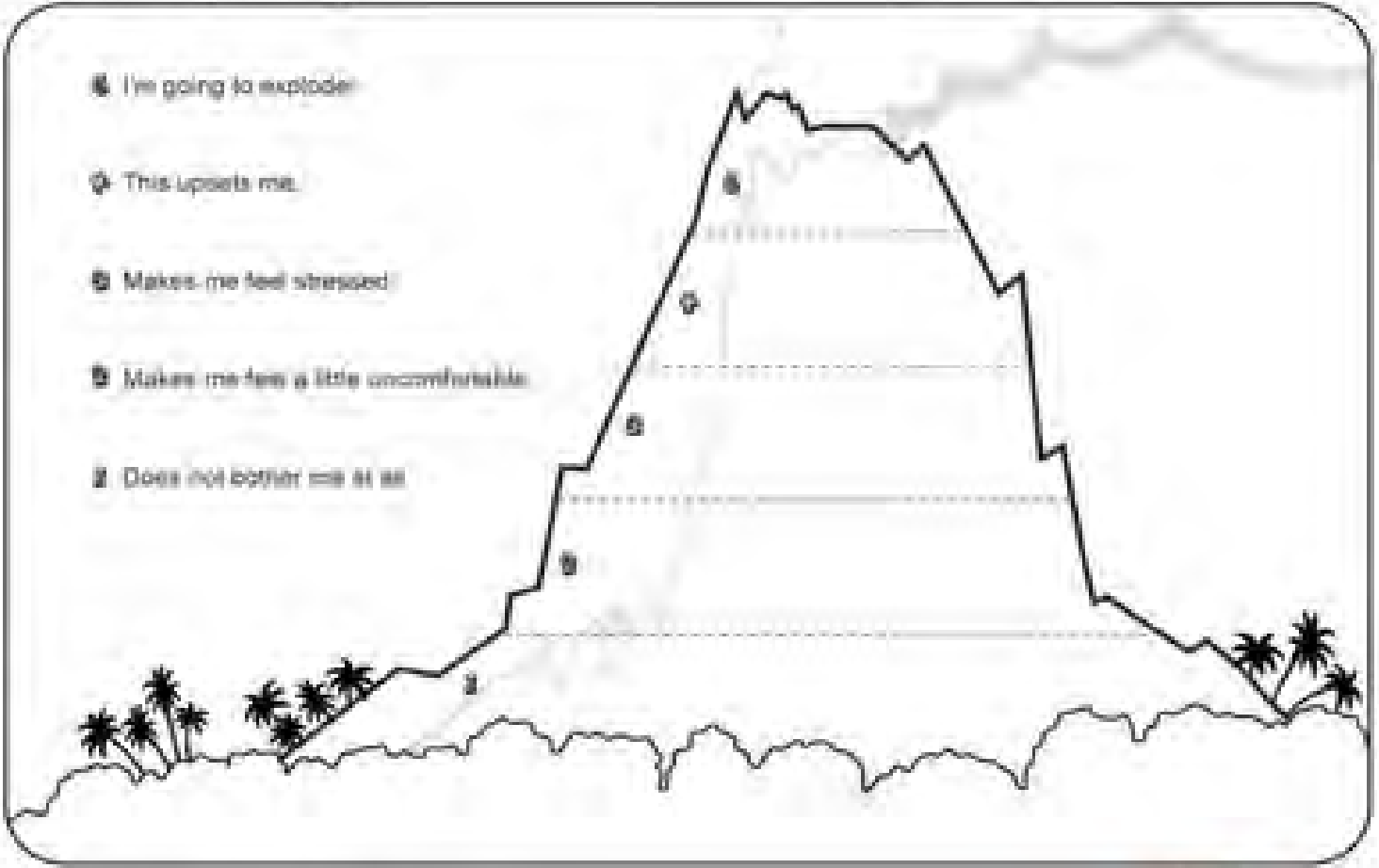
Disgust



Volcano Scale - My School Triggers

Name: _____

- 1 I'm going to explode!
- 2 This upsets me.
- 3 Makes me feel stressed!
- 4 Makes me feel a little uncomfortable!
- 5 Does not bother me at all!



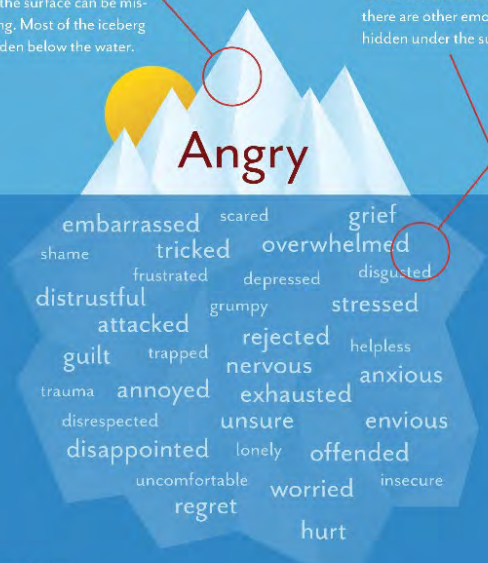
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Anger Iceberg

Icebergs are large pieces of ice found floating in the open ocean. What you can see from the surface can be misleading. Most of the iceberg is hidden below the water.

This is how anger works. Often when we are angry, there are other emotions hidden under the surface.



The Gottman Institute

Soft Start

A "soft start" should be **flexible, individualised**, and **calm** beginnings to the school day, driven by the pupil's **personal** like and dislikes, worries and preferences, to ease them into the transition from home to school. There also then needs to be consideration given to the transition from this first session back into the classroom.

Soft starts must be developed in collaboration with the pupil and their trusted adult and reviewed on a regular basis.

Soft Start Suggestions:

- ✓ Arriving earlier or later to school.
- ✓ Access to a quieter entrance.
- ✓ Talk Time with their trusted adult. Use of scaling techniques to ascertain feelings, the day/journey to school, etc.
- ✓ Activities based around the pupil's interests- use of ICT, art materials, reading, Lego, etc.
- ✓ Going through the timetable for the day.
- ✓ Check-in at the end of the day can be just as important as the start of the day.
- ✓ Transition from their soft start to their first class must also be planned.
- ✓ Attend individually or with a peer.
- ✓ No expectation to attend assemblies.

Seating suggestions

- ✓ Discuss preferred seating position with the pupil and devise seating plan.
- ✓ Sit next to positive role model.
- ✓ Desk space: sit at a desk that is suitable to his/her sensory requirements.
- ✓ Many pupils find that sitting with their back to a wall, next to a window is the best as it allows them some control over light and temperature and reduces distractions or sensory input from people walking past.
- ✓ The desk location should be agreed with the pupil and should be trialled for several weeks. If it means that the pupil is not sitting with their peers this should not prevent this adjustment.
- ✓ Desk partitions: moveable partition walls can be used between desks in an open plan office to reduce visual distractions
- ✓ Noise cancelling headphones.

Sensory assessment checklist

(based on the sensory profile checklist from Bogdashina, 2003 and included in the IDP autism spectrum)

Tick which apply and then consider which teaching staff need to know this information.

Where possible, complete this in discussion with the parents or carers and the pupil.

No.	Item	Yes	No	Don't know	Action required
1	Resists changes to familiar routines				
2	Does not recognise familiar people in unfamiliar clothes				
3	Dislikes bright lights				
4	Dislikes fluorescent lights				
5	Is frightened by flashes of light				
6	Puts hands over eyes or closes eyes in bright light				
7	Is attracted to lights				
8	Is fascinated by shiny objects and bright colours				
9	Touches the walls of rooms				
10	Enjoys certain patterns (e.g. brickwork, stripes)				
11	Gets lost easily				
12	Has a fear of heights, lifts, escalators				
13	Has difficulty catching balls				
14	Is startled when approached by others				
15	Smells, licks, taps objects and people				

16	Appears not to see certain colours				
17	Uses peripheral vision when doing a task				

No.	Item	Yes	No	Don't know	Action required
18	Finds it easier to listen when not looking at person				
19	Remembers routes and places extremely well				
20	Can memorise large amounts of information on certain topics				
21	Finds crowded areas very difficult				
22	Prefers to sit at back of group or front of group				
23	Covers ears when hears certain sounds				
24	Can hear sounds which others do not hear				
25	Is very distressed by certain sounds				
26	Bangs objects and doors				
27	Is attracted by sounds and noises				
28	Does not like shaking hands or being hugged				
29	Likes a hug if chosen to do this				
30	Only seems to hear the first words of a sentence				
31	Repeats exactly what others have said				
32	Very good auditory memory for songs and rhymes				
33	Dislikes the feel of certain fabrics and substances				

34	Seems unaware of pain and temperature				
35	Dislikes certain foods and drinks				
36	Seeks pressure by crawling under heavy objects				
37	Hugs very tightly				
38	Enjoys feeling certain materials				

No.	Item	Yes	No	Don't know	Action required
39	Dislikes certain everyday smells				
40	Eats materials which are not edible				
41	Likes to have food presented in a certain way on the plate				
42	Dislikes crunchy or chewy food				
43	Quite clumsy and bumps into objects and people				
44	Finds fine motor movements hard				
45	Has difficulty running and climbing				
46	Finds it hard to ride a bike				
47	Does not seem to know where body is in space				
48	Has poor balance				
49	Afraid of everyday movement activities such as swings, slides, trampoline				
50	Has extremely good balance				

The Coventry ASD vs Attachment Problems Grid

Differences between Autistic Spectrum Disorder (ASD) and attachment problems based upon clinical experience and observations

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The Coventry Grid is an attempt to summarise the differences between the behaviour of children with Autistic Spectrum Disorder and those with significant attachment problems. It is based upon clinical work with children rather than research.

There is an emerging body of research which is clarifying the range of social and communication difficulties seen in children and young people who have experienced early adversity (particularly the work of Prof. Sir Michael Rutter; Dr. Helen Minnis; Prof. Jonathan Green; Prof. David Skuse).

The Grid is particularly thinking about children with ability in the mild learning disability to above average range and those who are interested in connecting with people. It is less useful for the more severe learning disability range and those children who are withdrawn and very avoidant of social contact.

This version of the Coventry Grid was added to by a London/South of England group of speech & language therapists who work in youth justice, and after discussions with professionals at CPD sessions about particular parts of the grid. There are no major revisions but there are additional descriptors added to some sections and some small

changes to descriptors.

1. Flexible thinking and behaviour

Children and young people with Autistic Spectrum Disorder and those with significant attachment problems and disorders present with difficulties with flexible thinking and behaviour. Their behaviour can be demanding and ritualistic, with a strong element of control over other people and their environment. The different 'flavour' seems to be about personality style, a strongly cognitive approach to the world in Autistic Spectrum Disorder, and a strongly emotional approach in children with problematic attachment. The need for predictability in children with problematic attachments suggests that the child is trying to have their emotional needs for security and identity met. In Autistic Spectrum Disorder, the emphasis seems to be on trying to make the world 'fit' with the child/young person's preference for order and routine.

Symptoms of ASD	Problems seen in both ASD & AD	Typical presentation in Autistic Spectrum Disorder	Typical presentation in Attachment Problems
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<p>1. Lack of flexibility of thought and behaviour</p>	<p>1.1 Preference for predictability in daily life</p>	<ul style="list-style-type: none"> ✓ Repetitive questions related to own intense interests ✓ Repetitive questioning re changes in routines and new experiences ✓ Ritualised greetings ✓ Becomes anxious if routine is removed and may seek to impose usual routine (e.g. wants same bedtime routine when away on holidays; won't accept the supply teacher) ✓ Inclined to try to repeat experiences and to interpret any repetition as routine (e.g. asks/demands repetition of following the same route to school; cannot cope with a change to appointments) ✓ Distressed when a routine or ritual cannot be completed (e.g. when cannot follow the usual route because of road works) 	<ul style="list-style-type: none"> ✓ Preference for ritualised caring processes (e.g. bedtimes, meals) ✓ Repetitive questioning re changes in routines and new experiences ✓ Copes better with predictability in daily routines but usually enjoys change and celebrations ✓ Looks forward to new experiences but may not manage the emotions they provoke (e.g. may not cope with excitement or disappointment) ✓ Takes time to learn new routines ✓ Routines tend to be imposed by adults in order to contain the child's behaviour more easily
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	<p>1.2 Difficulties with eating</p>	<ul style="list-style-type: none"> • May limit foods eaten according to unusual criteria such as texture, shape, colour, make, situation, rather than what that food is (e.g. will eat chicken nuggets but no other chicken) 	<ul style="list-style-type: none"> • Anxious about the provision of food and may over-eat (or try to) if unlimited food is available • May be unable to eat when anxious • May hoard food but not eat it
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	<p>1.2 Difficulties with eating cont.</p>	<ul style="list-style-type: none"> • May adjust eating because of literal understanding of healthy eating messages (e.g. sell-by dates, avoidance of fat) • Restricted diet seems to be about maintaining sameness and the child is not easily encouraged by people the child is attached to <p>Connection between high functioning ASD and eating disorders during adolescence</p>	<ul style="list-style-type: none"> • May be unable to eat much at a sitting • May 'crave' foods high in carbohydrate • Eating is transferable from situation to situation and the child can be persuaded by close adults • Children tend to have a range of eating disorders
	<p>1.3 Repetitive use of language</p>	<ul style="list-style-type: none"> • Echolalia • Repetition of 'favoured' words which are chosen for their sound or shape, rather than for their use in communication or emotional content <p>Children's repetitiveness is out of synch with their developmental stage</p> <p>May use formal or inappropriate language which they don't understand (incorrect use of words/phrases).</p>	<ul style="list-style-type: none"> • May develop rituals for anxiety provoking situations (e.g. says same things in same order when saying goodnight or leaving for school) • Older young people's self-comforting may take form of substance misuse/self-harming • Children's repetitive seems to be like that of a younger child – learning and playing with language

	<p>1.4 Unusual relationship with treasured possessions</p>	<ul style="list-style-type: none"> • Often uses possessions as ornaments, especially making collections of objects, but does not seek social approval for the collection or for its care • Will often be able to say where most treasured possessions are and recognise if they are moved • May be unable to dispose of old toys/papers/books even though they are not used • Shows a preference for old, familiar items (or toys/items which are part of a series) rather than new and different toys <p>Can be a mismatch between the amount of theoretical knowledge they have and their social use of that knowledge e.g. aware of football facts but doesn't share it socially.</p>	<ul style="list-style-type: none"> • May seek social approval/envy from others for possessions • May not take extra care with possessions which have been given an emotional importance • May be destructive with toys, exploring them and breaking them accidentally • New and different toys are appreciated • May lose things easily, even most treasured possessions, and may be unable to accept any responsibility for the loss • May deliberately destroy emotionally significant possessions when angry
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2. Play

Play is a clear problem in both groups of children/young people, with a lack of imagination and an inclination towards repetitiveness evident in both Autistic Spectrum Disorder and significant attachment problems. The difference seems to lie in what the way the children/young people play and use their recreational time: those with Autistic Spectrum Disorder are inclined to choose toys which are related to their intense interests and to play with those toys by mimicking what they have seen on DVDs and television. They may also choose play that is cognitive and characterised by collecting and ordering information, such as train spotting or reading bus timetables, and involves little emotional contact with other people. Children/young people with significant attachment problems may lack play skills but their play interests tend to be more usual.

Symptoms of ASD	Problems seen in both ASD & AD	Typical presentation in ASD	Typical presentation in Attachment Problems
2. Play	2.1 Poor turn taking and poor losing	<ul style="list-style-type: none"> • May try to impose own rules on games • May see eventually losing a game as unfair if was winning earlier in the game • Preference for playing alone or in parallel with others • Interests may be not be age appropriate and narrow. 	<ul style="list-style-type: none"> • May try to impose own rules on games so that they win • May be angry or upset about losing games and blame others or the equipment for their failure (there is a sense of fragile self-esteem in the style of reaction) • Preference for playing with others who can watch them win • Interests are more usual/age appropriate but response to the activity is emotionally driven.

	2.2 Poor play with toys	<ul style="list-style-type: none"> Plays with toys as objects rather than personifying them May spend all time organising toys and arranging in patterns (e.g. ordering by size, colour) May 'play' with unusual things (e.g. reading the telephone book, watching water run down the drain) for long periods from a young age 	<ul style="list-style-type: none"> Uses possessions & actions to engage the attention of other children May play games which include own experience of traumatic life events and difficult relationships May have poor concentration on activities and be able to play alone only for very brief periods (or be able to be alone briefly)
	2.3 Poor social play	<ul style="list-style-type: none"> Dislike and avoidance of others joining in play Lacks interest in social play with parents/carers 	<ul style="list-style-type: none"> Relies upon adults to provide play opportunities and/or to direct play May prefer to play with adults (esp. carers) rather than children
	2.4 Repetitive play	<ul style="list-style-type: none"> Lack of interest in developing a range of play Strong preference for the familiar and tendency to play alone for long periods 	<ul style="list-style-type: none"> Plays repetitively with adults much as a toddler likes to play such as hide and seek, lap games Plays out past experiences and preferred endings repeatedly (e.g. escaping from danger, saving siblings)
	2.5 Poor imaginative play	<ul style="list-style-type: none"> Difficulty playing a variety of roles within games Difficulty incorporating a range of toys into the same game (e.g. using both Dr Who and Spiderman toys in a game) Preference for toys which have a mechanical rather than emotional nature (e.g. cars, trains, Lego) or which require logic and order (e.g. reviewing and organising collections of objects) or 	<ul style="list-style-type: none"> Difficulty ending role play games May be able to take various roles but may show a strong preference for a kind of role (e.g. always the baby, always the angry father) May not seem to enjoy solo imaginative play and lose interest but can play imaginatively with another person

		examining objects (e.g. watching spinning objects)	
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3. Social interaction

There are key similarities in social interaction: children/young people in both groups tend to have an egocentric style of relationship with other people and lack awareness of the subtle variations in social interaction which are necessary to develop successful relationships with a range of other people.

Symptoms of ASD	Problems seen in both ASD & AD	Typical presentation in ASD	Typical presentation in Attachment Problems
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<p>3. Poor social interaction</p>	<p>3.1 Difficulties with social interaction</p> <p>3.2 More successful in interactions with adults than peers</p> <p>3.3 Own needs drive interactions</p> <p>3.4 Lacks awareness of risk and personal danger in interactions with adults</p>	<ul style="list-style-type: none"> • Interaction is usually one-sided and egocentric with little regard for the response of the audience • Does not often manipulate others emotionally except through angry outbursts (i.e. would rarely ingratiate self with audience) • May perform better in less emotional situations • Poor awareness of own role in interactions <p>Lack of social imagination – can't imagine what risks might be associated with certain peer /adult relationships (it can look similar to attachment in need to make friends)</p>	<ul style="list-style-type: none"> • Seeks an emotionally expressive audience for interactions (e.g. seeks to provoke strong reactions in audience such as anger, sympathy, support, approval) • May make persistent attempts to interact with adults or older children rather than with age peers • May initiate interactions with others which allow them frequently to play the same role in relation to self (e.g. as the victim, as the bully). We need to look at the relationships and see what need it meets. In attachment it is likely to be meeting an emotional need, possibly to do with pleasing others.
	<p>3.5 Difficulty sharing and working in a group</p>	<ul style="list-style-type: none"> • Lacks awareness of the social expectation that the child will share (because the child does not understand or need the social approval of others) • May not realise the needs of others waiting for their turn 	<ul style="list-style-type: none"> • Aware of the social need to share but anxious about sharing (especially food) and may refuse or hoard or hide possessions and food to avoid sharing • May take things which are important to others with awareness that this will be upsetting for the other person

	3.5 Difficulty sharing and working in a group	<ul style="list-style-type: none"> Lacks awareness of the social expectation that the child will share (because the child does not understand or need the social approval of others) <p>May not realise the needs of others waiting for their turn</p>	<ul style="list-style-type: none"> Aware of the social need to share but anxious about sharing (especially food) and may refuse or hoard or hide possessions and food to avoid sharing May take things which are important to others with awareness that this will be upsetting for the other person
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4. Mind reading

Both groups have difficulties taking the perspective of another person and reading intentions.

Symptoms of ASD	Problems seen in both ASD & AD	Typical presentation in ASD	Typical presentation in Attachment Problems
4. Mind reading	4.1 Difficulty appreciating others' views and thoughts	<ul style="list-style-type: none"> Rarely refers to the views of others 	<ul style="list-style-type: none"> May be manipulative (or overly compliant) and ingratiate self with adults/children
	4.2 Lack of appreciation of how others may see them	<ul style="list-style-type: none"> Lacks awareness of other's views of self, including lack of awareness of 'visibility' of own difficulties (e.g. may volunteer to perform gym sequence even though child is very poor at gym) <p>Does not appreciate the information parents would like to hear about successes and</p>	<ul style="list-style-type: none"> Inclined to blame others for own mistakes Draws attention away from own failures towards own successes May try to shape others' views of self by biased/exaggerated reporting

		enjoyment	
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	4.3 Limited use of emotional language	<ul style="list-style-type: none"> Rarely refers to the emotional states of self and others 	<ul style="list-style-type: none"> Hyper-vigilant with regard to particular emotions in others (e.g. anger, distress, approval) and often makes reference to these states Poor emotional vocabulary
	4.4 Problems distinguishing between fact and fiction	<ul style="list-style-type: none"> May not realise that cartoons, toys, animations and science fiction are not real May not realise that fantasy play is a temporary role May be easily influenced by fantastic claims and advertising Lies are often easily discovered and 'immature' in style 	<ul style="list-style-type: none"> Tendency to see self as more powerful and able to overcome enemies, or as vulnerable and powerless to offer any challenge May talk repeatedly of how to overcome captors/escape from imprisonment/kill enemies even when these adversaries are obviously bigger, stronger and more powerful than the child May not be able to judge whether a threat is realistic and act as if all threats, however minor or unrealistic, need to be defended against Lies may be elaborate and also may deliberately be harmful to others' reputations and designed to impress the audience

5. Communication

There are many areas of similarity in the social communication difficulties because they are about the subtleties of communication.

Symptoms of ASD	Problems seen in both ASD & AD	Typical presentation in ASD	Typical presentation in Attachment Problems
5. Communication	5.1 Pragmatic language problems	<ul style="list-style-type: none"> Poor awareness of the purpose of communication Lacks awareness of needs of audience Does not repair communication break down Poor eye contact (may be fleeting, staring, is not synchronised with verbal communication) Proximity does not signal intimacy or desire for contact Often does not start conversation by addressing the person Conversation is stilted The burden of communication lies with the listener/adult Assumes prior knowledge of listener 	<ul style="list-style-type: none"> Lack of attention to the needs of the listener through poor attention to communication (due to poor modelling) Eye contact affected by emotional state May be overly sensitive to voice tone, volume and stance of speaker (hyper vigilant to potential emotional rejection) Better able to initiate conversation May be overly sensitive to voice tone, volume and stance of speaker (hyper vigilant to potential emotional rejection) Non-verbal communication may be delayed (this includes reading of facial expressions & gestures) but progress can be good with intervention. This can vary depending on type of attachment difficulties. Can be hyper vigilant; often described as

			manipulative because of poor emotional regulation
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	5.2 Poor understanding of inferred meaning, jokes, sarcasm and gentle	<ul style="list-style-type: none"> • Poor understanding of idiomatic language 	<ul style="list-style-type: none"> • Gentle teasing may provoke extreme distress (self-esteem seems to be too fragile to cope) – internalise/assume it is about them • Poor understanding of idiomatic language (and may take misunderstandings personally).
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	teasing		
	5.3 Use of noise instead of speech	<ul style="list-style-type: none"> Makes noises for personal pleasure (as with favourite words) e.g. barking 	<ul style="list-style-type: none"> Attention-seeking noises (e.g. screams/screeches/whines under stress) to signal emotional needs and wishes
	5.4 Vocabulary	<ul style="list-style-type: none"> May have word-finding problems Often have unusually good vocabulary (for age, or cognitive ability, or within specific interest areas) Less use of vocabulary related to emotions 	<ul style="list-style-type: none"> Often poor vocabulary range for age and ability May use more emotive vocabulary (to get needs met) Often poor vocabulary range for age and ability Acute by the time they get to adolescence. May use more emotive vocabulary (to get needs met) Lots of basic negative vocab around anger, much fewer vocab items known to describe other emotions. Can be stuck in 'street' style of communication and doesn't know how to change register depending on audience.
	5.5 Commenting	<ul style="list-style-type: none"> Provides detail in pedantic fashion and gives excessive information 	<ul style="list-style-type: none"> Reduced amount of commenting behaviour

6. Emotional regulation

Although the behaviour may be similar, the causes seem to be different

Symptoms of ASD	Problems seen in both ASD & AD	Typical presentation in ASD	Typical presentation in Attachment Problems
6. Emotional regulation	6.1 Difficulties managing own emotions and appreciating how other people manage theirs	<ul style="list-style-type: none"> • Extremes of emotion may provoke anxiety and repetitive questioning and behaviour • Does not easily learn management of emotions from modelling (also likely to need an explanation) • Poor recognition of emotions • Emotions take over from logic/knowledge of what one should do (e.g. when losing a game) • Does not show displays of emotion to everyone – discriminating between people and places (e.g. never has a temper tantrum in school) • Difficulties showing empathy even for significant others in life <p>Cognitive empathy is poor</p>	<ul style="list-style-type: none"> • Difficulty coping with extremes of emotion and recovering from them (e.g. excitement, fear, anger, sadness) • May provoke extreme emotional reactions in others which tend to cast others in roles which are familiar from their own past experience of less healthy relationships • May be able to learn more easily from a nonverbal example than from talking • Shows emotional displays to people child does not know (indiscriminate) and tends to carry on longer (e.g. temper tantrums occur anywhere and at any time) • Difficulties showing empathy in general but can show better empathy towards a significant other <ul style="list-style-type: none"> • Highly tuned to non-verbal aspects of emotions

	6.2 Unusual mood patterns	<ul style="list-style-type: none"> Sudden mood changes in response to perceived injustice 	<ul style="list-style-type: none"> Sudden mood changes related to internal states (e.g. to PTSD, flashbacks) and perceived emotional demands
	6.3 Inclined to panic	<ul style="list-style-type: none"> Panics about change in routines and rituals and about unexpected and novel experiences 	<ul style="list-style-type: none"> Panic related to not having perceived needs met (especially food, drink, comfort, attention)

7. Executive function

Symptoms of ASD	Problems seen in both ASD & AD	Typical presentation in ASD	Typical presentation in Attachment Problems
7. Problems with executive function	7.1 Unusual memory	<ul style="list-style-type: none"> Poor short term memory unless well-motivated Very good long-term memory with recall of excessive detail for areas of particular interest to the child 	<ul style="list-style-type: none"> Fixated on certain events Recall may be confused Selective recall
	7.2 Difficulty with concept of time – limited intuitive sense of time	<ul style="list-style-type: none"> Rigid reliance on the using precise times (e.g. uses watch and unable to guess the time) Waiting irritates child because it affects routine 	<ul style="list-style-type: none"> Time has emotional significance (e.g. waiting a long time for dinner is quickly associated with feeling of emotional neglect and rejection)

	7.3 Poor central coherence	<ul style="list-style-type: none"> Inclined to consider the immediate context (not taking into account past experiences and emotional factors) 	<ul style="list-style-type: none"> Emotional bias leads to ignoring some elements of a situation (attention drawn to elements with emotional significance)
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8. Sensory processing

Symptoms of ASD	Problems seen in both ASD & AD	Typical presentation of in ASD	Typical presentation in Attachment Problems
8. Problems with sensory processing	8.1 Difficulty integrating information from senses (e.g. lack of awareness of heat, cold, pain, thirst, hunger, need to urinate/defecate) and lack of physical problem solving skills (e.g. removing coat when hot)	<ul style="list-style-type: none"> May be passive and quiet in acceptance of discomfort or may be distressed but does not communicate the source of distress May be hypersensitive to some light sensations even when pain threshold is high (e.g. labels in clothes irritate but a bitten arm does not) 	<ul style="list-style-type: none"> Physical discomfort may be accompanied by a strong emotional reaction towards carer (e.g. anger and blame of carer for the discomfort) Discomfort from basic needs may not be reported to carer (e.g. hunger, thirst) until they are intense Discomfort connected with physical needs may quickly provoke irritability and distress and provoke the carer to work out and solve the problems for/with the child

	8.2 Unusual physical proximity	<ul style="list-style-type: none"> Physical distance is unrelated to intimacy (e.g. they stand too close because they are unaware of social proximity rules) 	<ul style="list-style-type: none"> Shows awareness that physical closeness is related to emotional reactions (e.g. increases distance to signify rejection; seeks excessive closeness when anticipating separation)
	8.3 Self stimulation	<ul style="list-style-type: none"> Self-stimulation is likely to be related to own sensory needs 	<ul style="list-style-type: none"> May show sexualised behaviour or present in a sexual way to provoke reactions or to self soothe. Self-harm is connected with emotional state

Checklist of **Student's** view of **Normal** way of working

Name of Student:	Class:
Name of Teacher :	Subject:
S= Sometimes	

TIME	YES	S	NO
I finish tasks after others			
I need extra time for assignments			
I need to take time to think before I can answer a verbal question			
I need the teacher to explain the task again before I can understand what I have to do			

READING	YES	S	NO
I use a laptop or someone to read to me in class			
I don't like reading out loud			
I have problems following written instructions			
I often do not understand what I have just read			
I find it hard to remember what I have read			

WRITING	YES	S	NO
My handwriting is hard to read for me and/or for others			
I have difficulty copying from the board			
I find it hard to take notes			
I prefer to type than to write by hand			
I need help to plan my written work			

I can talk through my answers, but I find it hard to write anything down			
I need help with spelling			
I have difficulty with grammar and punctuation			

MEMORY & CONCENTRATION	YES	S	NO
I have difficulty following what the teacher says			
I have difficulty concentrating for long periods			
I have difficulty remembering messages, appointments			
I need to have instructions repeated			
I need to have instructions written down			

PRACTICAL TASKS	YES	S	NO
I find practical tasks hard			
I prefer practical tasks to written ones			
I understand better if I can do an activity rather than listening/writing about it			

ORGANISATION	YES	S	NO
I find organising myself difficult- I lose things and forget to bring items to school			
I find it hard to meet deadlines			

VISION	YES	S	NO
I need a large print version			
I use coloured overlay when reading. The colour I use is:			
The print blurs or shimmers on the page			
I prefer handouts on coloured paper. The colour I use is:			

EXAMS	YES	S	NO

I find it hard to revise for exams			
I cannot finish an exam in the time allowed			
I sometimes/often go blank in tests/exams			
I need to take frequent rest breaks			
I need to be reminded to stay focused on task			

What do teachers do to help you in your lessons, tests and exams?

What do you do to help yourself in your lessons, tests and exams?

Any other information

Date
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Stud
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Staff
 signa
 ture:
 Role:

Checklist of **Teacher's** view of **Normal** way of working

Name of Student:	Class:
Name of Teacher :	Subject:
S= Sometimes	

TIME	YES	S	NO
Finishes tasks after others			
Needs extra time for assignments			
Needs time to formulate an answer to a verbal question			
Needs careful explanations in straightforward language of tasks			

READING	YES	S	NO
Needs reading support and/or laptop in class			
Avoids reading out loud			
Has difficulty following written instructions			
Finds it difficult to quickly understand what just read			
Finds it hard to remember what they have just read			

WRITING	YES	S	NO
Handwriting is difficult to read			
Has difficulty copying from the board			
Finds taking notes hard			
Prefers to type than to write by hand			
Needs support to plan written work			
Can explain verbally without problems but struggles to write it down.			
Needs support with spelling			
Grammar and punctuation insecure			

MEMORY & CONCENTRATION	YES	S	NO
Has difficulty following oral instructions			
Has difficulty concentrating for long periods			
Has difficulty remembering messages, appointments			
Needs to have instructions repeated			
Needs to have instructions written down			

PRACTICAL TASKS	YES	S	NO
Prefers practical tasks to written ones			
Understands better if able to consolidate learning through practical experience			

ORGANISATION	YES	S	NO
Organisational skills need support- loses/forgets things needed.			
Difficulty working efficiently			

VISION	YES	S	NO
Needs large print version			
Uses coloured overlay when reading. The colour used is:			
Benefits from handouts on coloured paper. The colour used is:			

EXAMS	YES	S	NO
Finds revising for exams hard			
Unable to finish an exam in the time allowed			
'Panics' when faced with tests/exams			
Needs to take frequent rest breaks			
Needs timely reminders to stay focused on task			

What adjustments are made in lessons?

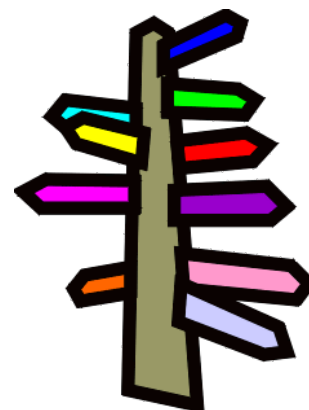
Any other information

Date normal way of working completed:

Staff signature: _____ Role: _____

Recommendations of Further Resources

The following resources are ideas for you to use as expected targeted provision, provided through school via 1:1 withdrawal sessions and small group sessions, some of these should be implemented before the pupil is referred to us for more intensive higher need's intervention.



Social interaction and Communication

- ✓ **Socially Speaking-book and board game:**
<https://www.ldalearning.com/product/social,-emotional-and-mental-health/social-skills/games/socially-speaking-special-offer/admt11389>
- ✓ **Talk-about for Teenagers:** <https://www.hope-education.co.uk/product/sen-resources/skills/talkabout-for-teenagers/ajmt14290>
- ✓ **Thinking about you thinking about me:**
https://www.thinkingbooks.co.uk/buy/thinking-about-you-thinking-about-me-2nd-edition_10.htm
- ✓ **Super Skills: Activities for Teaching Social Interaction:**
<https://www.amazon.co.uk/Super-Skills-Activities-Teaching-Interaction/dp/1931282676>
- ✓ **Free visual supports to support language and communication:** <https://www.elsa-support.co.uk/category/free-resources>
- ✓ **Exam guidance - National Autistic Society:** <https://www.autism.org.uk/about/in-education/exam-guidance.aspx>
- ✓ **Classroom based – Sensory aid resources. Reusable Dry Erase Pockets Set:**
https://www.amazon.co.uk/YOTINO-Reusable-Assorted-Resources-Including/dp/B07ZTK7624/ref=sr_1_5?dchild=1&keywords=dry+erase+pockets&qid=1593593767&sr=8-5

Social and Emotional Learning

- ✓ **CBT Workbook:** https://www.amazon.co.uk/CBT-Toolbox-Children-Adolescents-Worksheets/dp/1683730755/ref=pd_sbs_14_18?encoding=UTF8&pd_rd_i=1683730755&pd_rd_r=600974f6-0f5e-4b72-983d-399ed8cd603c&pd_rd_w=bdKLw&pd_rd_wg=24dfv&pf_rd_p=2773aa8e-42c5-4dbe-bda8-5cdf226aa078&pf_rd_r=M3QSD0VJJYD9ED5G9APB&psc=1&refRID=M3QSD0VJJYD9ED5G9APB
- ✓ **SEAL – Social and emotional learning - Social and emotional learning helps children and young people to:** <http://www.sealcommunity.org/>
- ✓ **The Blob Tree:** <https://www.blobtree.com/>

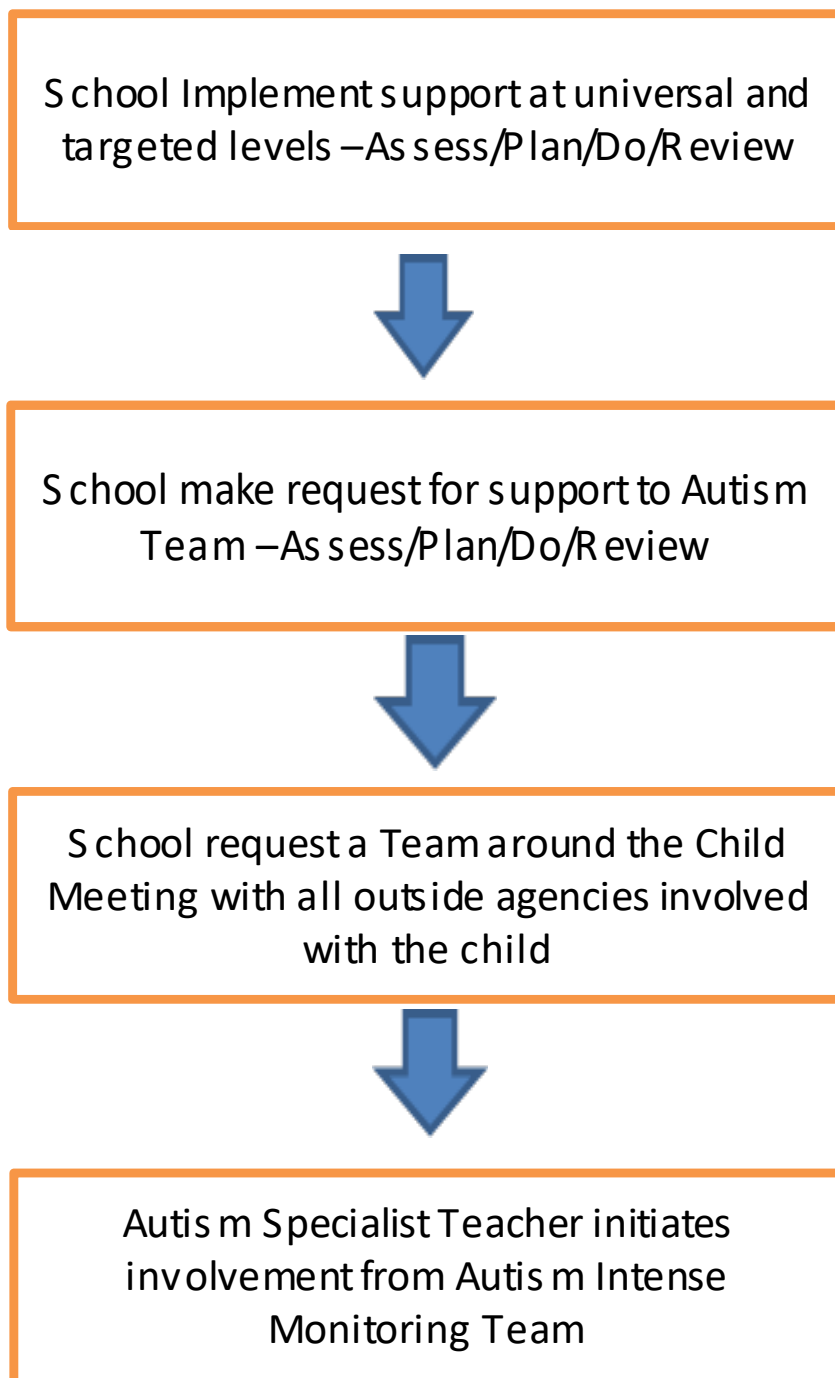
Rigidity of Thought and Behaviour

- ✓ **The Incredible 5 point Scale:** <https://www.5pointscale.com/>
- ✓ **Anxiety workbook for Teens – Self Esteem:** https://www.amazon.co.uk/Anxiety-Workbook-Teens-Activities-Instant/dp/1572246030/ref=sr_1_27?crd=L8WLVUSIG7CH&dchild=1&keywords=self+esteem+workbook+for+teens&qid=1592217316&sprefix=self+esteem%2Caps%2C298&sr=8-27
- ✓ **The ASD Workbook:** https://www.amazon.co.uk/ASD-Workbook-Understanding-Spectrum-Disorder/dp/184905195X/ref=sr_1_1?dchild=1&hvadid=79920783738832&hvbmt=be&hvdev=c&hvqmt=e&keywords=the+asd+workbook&qid=1592309274&sr=8-1&tag=mh0a9-21

Higher Need Provision Strategies

Provision	Page	Tick
Adapt or reduce timetable where appropriate – see LA requirements for reduced timetables on Local Offer.		
Where possible, provide extensive and focused individual intervention frequently in school, based on the needs of the child.		
Hold a Team Around the Child (TAC) Meeting to holistically assess what is creating barriers for the child to successfully access education and plan next steps on how to support them. This should be attended by all professionals supporting the child at this time, as well as Parents or Carers. It should be noted that the child may like to attend this meeting or they may wish to have input in some other way to include their voice for consideration		
Within the TAC Meeting, discuss what else may be affecting the child's ability to access education in school, this may be a medical or behavioural need and consider this when planning next steps. This may also be an appropriate time to request an AIM referral.	65	
Create a Positive Handling Plan where needed to support a child who may need it.	66	
A Request for Support should be made to SISS's Autism Team, including evidence of graduated response that has been put in place by school when supporting the child until this point. This document can be found on the local offer.	68	

Autism Intense Monitoring (AIM) Support from the Autism Team



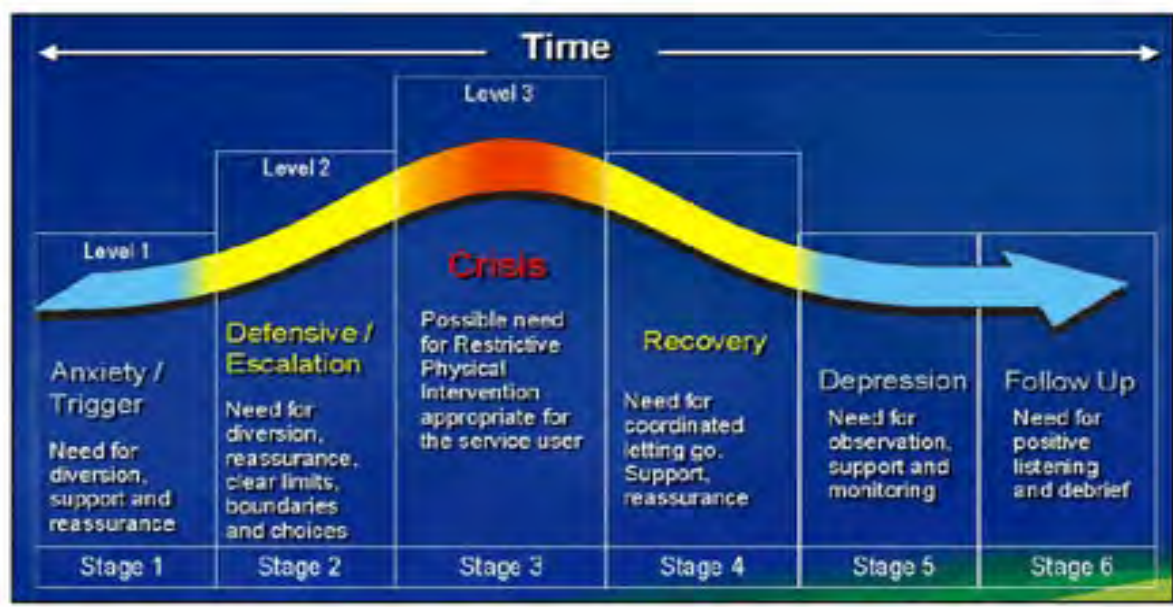
The focus of the Autism Intense Monitoring Team is to maintain school placements for those pupils at risk of exclusion and on significantly reduced timetables, support transitions in and out of settings for these pupils, or to support pupils who are currently out of setting back into an appropriate setting. The team holds a register of pupils with a diagnosis of Autism who are currently out of setting.

Positive handling plan

Name of child:	
Name of staff completing plan:	
Any known medical needs of child:	
Date of plan:	Date of review of plan:

The 'crisis curve'

Crises tend to follow the pattern outlined below. It is important to carefully consider the observable behaviours for a child which would indicate which stage the individual may be at. It is equally important to then identify the most effective de-escalation techniques for each of the first three stages. These will be different for each child and should be specific to the individual



Acknowledgement: Bernard Allen & George Matthews, Team-Teach

Environment and triggers (situations which can cause or lead to difficulties)
Prevention (any changes to routine or environment which might reduce the risk)
Stage 1-3
What might happen (what could the behaviour look like or sound like for this particular individual)
Level 1 (anxiety):
Level 2 (escalation):

Level 3 (crisis):	
De-escalation techniques (things that can help calm the child)	Things to avoid
Stage 3 Managing crisis behaviour (what to do step by step and who will do it)	
Stage 4-5 Recovery and depression (what will happen step by step, who will support the child, how will they be monitored)	
Stage 6 Follow up (listening and debriefing – who will be involved, any resources needed to aid communication for the child, any record of physical intervention to be completed, any staff support required)	

Further Reading and Useful Links

Resources on the local offer: <https://socialsolihull.org.uk/localoffer/education/children-and-young-peoples-send-service/siss-2/the-autism-team/>

- ❖ Solihull SEN Banding Document:
This is a document for Schools, families and all stakeholders that gives clear information and guidance and description of the different categories of special educational needs that children and young people may experience. It also states the requirements and provision that Schools need to put in place to support a child's additional needs. This document also supports Schools in evidencing a graduated approach to need and the requirements it has deemed that a request for Statutory Assessment for an EHCP is required.
<https://socialsolihull.org.uk/localoffer/education/resources-to-support-inclusion/>
- ❖ Autism Team Referral Process:
<https://socialsolihull.org.uk/localoffer/education/children-and-young-peoples-send-service/siss-2/the-autism-team/>
- ❖ Overview of Training we offer:
<https://socialsolihull.org.uk/localoffer/education/children-and-young-peoples-send-service/siss-2/training/>
- ❖ Request for Support from the Autism Team:
<https://socialsolihull.org.uk/localoffer/wp-content/uploads/sites/21/2019/12/Autism-Team-School-Request-for-support-form.docx>
- ❖ Solihull My Life Portal:
<https://solihull.mylifeportal.co.uk/autism/>

Other Useful Links:

- ❖ National Autistic Society:
<https://www.autism.org.uk/>
- ❖ Autism West Midlands:
<https://www.autismwestmidlands.org.uk/>
- ❖ Autism Education Trust (AET):
<https://www.autismeducationtrust.org.uk/>
- ❖ Carol Gray Social Stories:
<https://carolgraysocialstories.com/>
- ❖ Autism Matters:

<https://www.autismmatters.org.uk/>

- ❖ Steps to avoid the exclusion of Autistic pupils:
<https://socialsolihull.org.uk/localoffer/wp-content/uploads/sites/21/2020/06/Steps-to-avoid-the-exclusion-of-autistic-pupils.pdf>
- ❖ Successful reintegration of Autistic pupils following school exclusion:
<https://socialsolihull.org.uk/localoffer/wp-content/uploads/sites/21/2020/06/Successful-reintegration-of-autistic-pupils-following-school-exclusion.pdf>
- ❖ AET guide to help understand school duties re exclusion and EA:
<https://socialsolihull.org.uk/localoffer/wp-content/uploads/sites/21/2020/06/AET-obj-B-guide-to-help-gB-understand-sch-duties-re-exclusion-and-EA-2010.pdf>
- ❖ AET School stress and anxiety – School refusal – impact on the family:
<https://socialsolihull.org.uk/localoffer/wp-content/uploads/sites/21/2020/06/AET-obj-C-School-stress-and-anxiety-sch-refusal-and-impact-on-family-life.pdf>
- ❖ Young Minds:
https://youngminds.org.uk/?gclid=EAlaIqobChMlypnip9rH6QIVB-7tCh1uUQF2EAAAYASAAEgK0DfD_BwE
- ❖ AET The Den (older teenagers / parents)
<https://www.autismeducationtrust.org.uk/the-den/>
- ❖ AET kids Zone
<https://www.autismeducationtrust.org.uk/kids-zone/>
- ❖ Exam accommodations booklet for secondary schools
<https://www.autismeducationtrust.org.uk/shop/aet-exam-accommodations/>
- ❖ Autism West Midlands - Online resources to download and print
<https://www.autismwestmidlands.org.uk/online-resources/visual-resources/>
- ❖ Cosmic Kids Yoga
<https://www.cosmickids.com/about/>
- ❖ Go Noodle
<https://www.gonoodle.com/>
- ❖ Comic Strip Conversation: <https://www.autism.org.uk/about/strategies/social-stories-comic-strips.aspx>